## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	Number: 3235-0287				
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hours per response	. 0.5				

	Form 4 or Form 5 y continue. <i>See</i> ).		d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940						
1. Name and Address of Reporting Person* Anders Jack (Last) (First) (Middle) C/O REVOLUTION MEDICINES, INC. 700 SAGINAW DRIVE			2. Issuer Name and Ticker or Trading Symbol <u>Revolution Medicines, Inc.</u> [ RVMD ]       3. Date of Earliest Transaction (Month/Day/Year)	(Check all applicate Director X Officer (gi below)	10% Owner ve title Other (specify below)				
		CINES, INC.	06/17/2021		See Remarks				
/00 SAGINAW (Street) REDWOOD CITY (City)		94063	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	nt/Group Filing (Check Applicable I by One Reporting Person				
	(State)	(Zip)	_	Form filed Person	d by More than One Reporting				
		Table I - Non-De	I rivative Securities Acquired, Disposed of, or Ben	eficially Owned					

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (	Transaction Disposed Of (D) (Instr. 3, 4 and 5) Code (Instr.			Securities Beneficially	Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1130.4)	(1130.4)
Common Stock	06/17/2021		<b>S</b> <sup>(1)</sup>		160	D	\$34.1241 <sup>(2)</sup>	<b>8,358</b> <sup>(3)(4)</sup>	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 7. Title and 9. Number of 1. Title of 3. Transaction 3A. Deemed 5. Number 8. Price of 10. 11. Nature Expiration Date (Month/Day/Year) Derivative of Indirect Derivative Conversion Date (Month/Day/Year) Execution Date, Transaction Amount of derivative Ownership Derivative or Exercise Price of Derivative Security (Instr. 3) if any (Month/Day/Year) Code (Instr. 8) Securities Security (Instr. 5) Securities Form: Beneficial Direct (D) Underlying Derivative Securities Beneficially Ownership or Indirect (I) (Instr. 4) Acquired Owned (Instr. 4) (A) or Disposed of (D) (Instr. 3, 4 Security (Instr. Security Following 3 and 4) Reported Transaction(s) (Instr. 4) and 5) Amount Number Date Expiration of v (A) (D) Exercisable Date Title Shares Code

Explanation of Responses:

1. Pursuant to an automatic sell-to-cover imposed by the terms of the initial grant of the restricted stock units ("RSUs") awards, the shares were sold upon the vesting of the RSUs solely to cover applicable withholding taxes.

2. This transaction was executed in multiple trades in prices ranging from \$33.66 to \$34.13, inclusive. The price reported in Column 4 above reflects the weighted average sale price. The Reporting Person hereby undertakes to provide to the Securities and Exchange Commission staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote

3. Includes 614 shares acquired under the Issuer's Employee Stock Purchase Plan on May 31, 2021.

4. Includes 6,938 RSUs.

**Remarks:** 

SVP, Finance and Principal Accounting Officer

/s/ Jack Anders

06/22/2021

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.